FEDERAL EMERGENCY MANAGEMENT AGENC NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number Mayfield Housing Corp., a California Corporation BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 48987, 48991, 48995 WOODGROVE STATE ZIP CODE Fremont CA 94539 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tract 7409 Lot 64 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): (##° - ##' - ##.##" or ##.###") □ NAD 1927 □ NAD 1983 ☐ USGS Quad Map Other: Horizontal datum based upon localized survey SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE City of Fremont 065028 Alameda CA **B4. MAP AND PANEL B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) B5. SUFFIX NUMBER **B6. FIRM INDEX DATE** B8. FLOOD ZONE(S) EFFECTIVE/REVISED DATE (Zone AO, use depth of flooding) 0048 D 02-09-2000 02-09-2000 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ☐ FIS Profile **⊠** FIRM ☐ Community Determined Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on:

Construction Drawings* ☐ Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum City of Fremont Conversion/Comments No conversion required; City of Fremont is NGVD 29 Elevation reference mark used o a) Top of bottom floor (including basement or enclosure) 21.05 ft.(m) **Embossed Seal** o b) Top of next higher floor 21.72 ft.(m) o c) Bottom of lowest horizontal structural member (V zones only) and Date ft.(m) No. 31954 o d) Attached garage (top of slab) 21.05 ft.(m) Exp. 12-31-08 o e) Lowest elevation of machinery and/or equipment icense Number, Signature, servicing the building (Describe in a Comments area) ft.(m) o f) Lowest adjacent (finished) grade (LAG) 20.82 ft.(m) o g) Highest adjacent (finished) grade (HAG) 21.23 ft.(m) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 0 o i) Total area of all permanent openings (flood vents) in C3.h _sq. in. (sq. cm) SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. CERTIFIER'S NAME Peter B. McMorrow LICENSE NUMBER 31954 TITLE Engineer COMPANY NAME Civil Engineering Associates, Inc. **ADDRESS** CITY STATE ZIP CODE 635 North First Street, Bldg. A San Jose CA 95112 **TELEPHONE** SHIGHATURE DATE 408-452-1066 6

IMPORTANT: In these spaces, copy th	ne cor onding information from Section	on A.	For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit	, Suite, aiவor Bldg. No.) OR P.O. ROUTE AND BOX N	10.	Policy Number
CITY 48991, 4	8995 WOODGREVE STATE	ZIP CODE	Company NAIC Number
FREM 0,57	Č/A	94539	Company NAIC Number
SECTION	I D - SURVEYOR, ENGINEER, OR ARCHI	ITECT CERTIFICATION (CONTINUE	D)
Copy both sides of this Elevation Certificate for	(1) community official, (2) insurance agent/comp	eany, and (3) building owner.	
COMMENTS			
			Check here if attachments
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NOT R	REQUIRED) FOR ZONE AO AND ZO	
For Zone AO and Zone A (without BFE), comple	te Items E1 through E4. If the Elevation Certifical	te is intended for use as supporting informa	tion for a LOMA or LOMR-F,
Section C must be completed.		., -	
	ling diagram most similar to the building for which	n this certificate is being completed – see pa	ges 6 and 7. If no diagram accurately
represents the building, provide a sketch or F2. The top of the bottom floor (including basers)	pnotograpn.) ent or enclosure) of the building is ft.(m)in	(cm) C above or C below (check one)	the highest adjacent grade. /Lice
natural grade, if available).	sit of choostre) of the building is it.(iii)iii	i.(cm) above or below (check one)	the highest adjacent grade. (Ose
- · · · · · · · · · · · · · · · · · · ·	e page 7), the next higher floor or elevated floor ((elevation b) of the building isft.(m)ir	n.(cm) above the highest adjacent
grade. Complete items C3.h and C3.i on fro	ont of form.		
E4. The top of the platform of machinery and/or enatural grade, if available).	equipment servicing the building isft.(m)in	n.(cm) 🔛 above or 🔛 below (check one)	the highest adjacent grade. (Use
,	is available, is the top of the bottom floor elevated	d in accordance with the community's floods	nlain management ordinance?
	al official must certify this information in Section G.		nam management ordinance:
SECTION	F - PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE) CERTIFICATIO	N
	esentative who completes Sections A, B, C (Item:		hout a FEMA-issued or community-
	statements in Sections A, B, C, and E are correct	t to the best of my knowledge.	•
PROPERTY OWNER'S OR OWNER'S AUTH			
ADDRESS		ITY STAT	E ZIP CODE
2185 THE ALA	MEDA SAN	s dose ca	95126
SIGNATURE			PHONE 4237132
COMMENTS		7-8	7
<u> </u>			
	CECTION C. COMMUNITY INTO	PHATION (ORTIONAL)	Check here if attachments
The local efficial who is authorized by law or agric	SECTION G - COMMUNITY INFOR		
Certificate. Complete the applicable item(s) and	nance to administer the community's floodplain m	nanagement ordinance can complete Section	ons A, B, C (or E), and G of this Elevation
	sian below		
G1. The information in Section C was taken:		and embossed by a licensed surveyor, engi	neer, or architect who is authorized by sta
local law to certify elevation information.	from other documentation that has been signed a . (Indicate the source and date of the elevation da	ata in the Comments area below.)	•
local law to certify elevation information. G2. A community official completed Section	from other documentation that has been signed a . (Indicate the source and date of the elevation da E for a building located in Zone A (without a FEM	ata in the Comments area below.) IA-issued or community-issued BFE) or Zor	•
local law to certify elevation information. G2. A community official completed Section G3. The following information (Items G4-G9)	from other documentation that has been signed a . (Indicate the source and date of the elevation da E for a building located in Zone A (without a FEM is provided for community floodplain manageme	ata in the Comments area below.) IA-issued or community-issued BFE) or Zor ent purposes.	e AO.
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local law to certify elevation information. G2. A community official completed Section G3. The following information (Items G4-G9) G4. PERMIT NUMBER G7. This permit has been issued for: New C	from other documentation that has been signed a . (Indicate the source and date of the elevation da E for a building located in Zone A (without a FEM is provided for community floodplain manageme G5. DATE PERMIT ISSUED onstruction Substantial Improvement asement) of the building is:	ata in the Comments area below.) IA-issued or community-issued BFE) or Zor ent purposes.	e AO.
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